Form CT-108 Wisconsin Department of Revenue		Transmit your order by noon (CST) for same day processing Fax: (608) 280-3561 ● E-mail: cigarettestamporders@dor.state.wi.us ● Phone: (608) 266-3282 Pick Up or Express Mail: 2135 Rimrock Rd., Mail Stop 3-258, Madison, WI 53713									IMPORTANT: This form can only be used on shipments you will receive July 1, 2005 through June 30, 2006.		
Your Wisc. Cig Permit Numbe	•	Permitted Shipping Address: Sample						Contact Information: Name: E-Mail: Phone:			Extension:		
Order Date:			This form	is personalize	ed to permit ho	lders only		Fax:					
Comments:		Check Desired Type of Delivery: UPS Ground UPS 2nd Day Air UPS 2nd Day Air AM UPS Next Day Air Saver UPS Next Day Air UPS Next Day Air						Enter Stamp Receipt Date Here: Pay and report this receipt on return due 15 days after the end of the month of the date shown above.			For office use only Issue Date: Filled By: Checked By:		
Pack Size	Carton Layout	Unit Item Descri	Column A Stamps Per Unit	Column. B Units Ordered	0	al Stamps ordered ol. A x B)	Column C Tax Value Per Unit	Gross Value of Stamps Ordered (Col B x C)	Column D Unit Printing Cost	Printing Cost this Order (Col. B x D)	Beginning Serial Number Issued	Serial Numbers Not In Circulation	Ending Serial Number Issued
Reg. 20's	2 x 5	Rolls	30,000				\$23,100.00		\$16.20				
	2 x 5	Pads	1,500				\$1,155.00		\$4.49				
1 x 10	(Wides)	Pads	1,500				\$1,155.00		\$4.49				
			Total R	eg. 20s)								
Reg. 25's	2 x 4	Rolls	7,200				\$6,930.00		\$5.47				
	1 x 10	Rolls	4,800				\$4,620.00		\$3.36				
	1 x 10	Pads	1,500				\$1,443.75		\$4.49				
			Total R	eg. 25s	•								
Tribal 20's	2 x 5	Rolls	15,000		→		\$11,550.00		\$8.10				
Tribal 25's	1 x 10	Pads	1,500		→		\$1,443.75		\$3.90				
Transfer order information to your monthly CT-104 Schedule of Purchases for the month that you received these stamps.						Total Gross Val	ue of Stamps:	Total Printing Cost:		Incurred Shipping Cost:			